

Six Flags New England	
SUBJECT: WASTE MANAGEMENT PROCEDURES	SAFETY REFERENCE MANUAL
SECTION: 36	
EFFECTIVE: January 2016	SUPERSEDES: ALL PREVIOUS
CFR #: 29 CFR 1910 Subpart H – Hazardous Materials, Subpart Z –Toxic and Hazardous Substances	

### **36.1 PURPOSE**

To ensure all waste materials considered hazardous to the environment are handled, stored, and disposed of in accordance with Federal and State guidelines.

### **36.2 SCOPE**

This procedure applies to all employees of Six Flags New England whose positions require that they work with or around waste products.

### **36.3 DETERMINATION OF HAZARDOUS AND NON-HAZARDOUS WASTE GENERATED**

- A. The following are categorized examples of non-hazardous waste products routinely requiring inventory and disposal:

Waste motor oil, waste hydraulic oil, waste gear oil, waste lubricating oil and other waste not considered ignitable, corrosive, reactive or toxic.

- B. The following are categorized examples of hazardous waste routinely requiring inventory and disposal:

Paint waste, paint solvents, paint related by-products, fiberglass resin, methyl ethyl ketone, acetone, toluene, gasoline waste or any other waste considered to be ignitable, corrosive, reactive or toxic.

- C. Parts Washers - Solvent will be supplied by an approved vendor also responsible for labeling, delivery, removal and manifest.
- D. Any other chemical listed as Hazardous or Extremely Hazardous not specified above.
- E. Any other chemical not labeled or otherwise identified must be marked for analysis. The Safety Department must be notified of unidentified chemicals.

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## 36.4 HAZARDOUS WASTE

Six Flags New England is classified by the Environmental Protection Agency (EPA) as a generator of hazardous waste. Our EPA numbers are VC7000017709, VC000017690. (General Info. #). The following wastes are generated at Six Flags New England:

<u>Type</u>	<u>Source</u>
Solvent	parts cleaners
Paint related	Paint shop/Fiberglass shop
Absorbent (clay and pads)	Auto shop
Perchloroethylene	Wardrobe (dry cleaning machine)

### 36.4.1 Satellite Storage Areas

All waste at Six Flags New England is accumulated in satellite storage areas. Six Flags New England has 2 satellite storage areas, as follows:

<u>Location</u>	<u>Type Waste</u>
Maintenance	Oil
Paint Shop	Paint

NOTE: The solvent in the parts cleaners and the perchloroethylene in Wardrobe is usable until picked up for disposal. Therefore, these areas are not considered satellite storage areas.

### 36.4.2 Storage Requirements

Each Satellite Storage Area must meet the following requirements

1. Container must be properly labeled with the HAZARDOUS WASTE LABEL (Appendix A).

NOTE: Accumulation start date is NOT to be placed on drum until drum is full.

2. Container must have secondary containment.
3. Container must be kept closed except to introduce new waste.

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4. Paint Shop and Fiberglass Shop waste containers must be grounded.
5. Container must be inspected weekly for spills or leaks. (Reference Inspection Policy No.15.)
6. Container must not exceed 55 gallons.
7. Container must be taken to the Main Hazardous Waste Storage Building within 72 hours of becoming full or be transported off site by a certified transporter to a hazardous waste disposal facility.
8. Container should not be filled to the top. The container must have two to three inches open at the top for expansion.
9. Storage area must have spill equipment readily available.
10. Employees who will handle the containers and/or hazardous waste must be trained in hazardous waste handling procedures.

#### **36.4.3 Main Hazardous Waste Storage Location**

Six Flags New England Hazardous Waste Storage Buildings are located above. The Storage Building must meet the following requirements.

- A. The Storage Building must have secondary containment.
- B. The Storage Building must have adequate aisle space between pallets of waste to allow for inspection.
- C. Drums should be turned so that labels are visible.
- D. The Storage Building must be inspected weekly. (Reference \_\_\_\_\_ Inspection Procedure, Policy No.15.)
- E. All waste must be removed within 90 to 180 days (*depending on generator status*) and transported off site by a certified transporter.

NOTE: Generally, all waste that is accumulated at Six Flags New England will be picked up from the Satellite Storage Areas within 72 hours and transported off site by a certified transporter. Only in cases where this cannot be done or when special circumstances arise will waste be stored in the Main

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Hazardous Waste Storage Building.

#### **36.4.4 Inspections**

##### **A. Satellite Storage Areas**

The Safety Officer or designee inspecting satellite waste containment facilities will document the inspection and specify all deficiencies on the Hazardous Waste Storage Facility Inspection Form (Appendix B). The inspector will indicate by checkmark all items that comply. The inspector will mark with an "X" all items that are deficient and explain deficiencies in the "Comments" section.

1. Inspection Date - Date of inspection.
2. Inspection Performed by - Initials of the Safety Officer completing the inspection.
3. Facility Free of Spills and Leaks - The facility outside and inside should not have any leaks or spills. If any leaks or spills are noted, the inspector will notify the appropriate personnel immediately.
4. Waste Containers Properly Labeled - All waste containers must have LEGIBLE identifying stickers or placards.
5. Waste Container Tops Spill Free, Dry - Top of "lid" of container or drum should be free of any liquid, residue, or associated material. The lids should be secure whenever possible. Funnel, if applicable, should be removed when not in use and being replaced.
6. Compatible Waste Stored Properly - Waste products in or around an area should be in appropriate containment.
7. Adequate Aisle Space between Containers - Containers must be stored in a manner that allows a clear passage for immediate egress.
8. Waste Container Openings Secured, Tight - All lids will be secured when not in use. Only the correct lid will be used on container.  
(Rags, cork, or other material is not acceptable at any time).
9. Waste Containers within Secondary Containment - All drums or containers will be kept within a secondary containment. A secondary

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containment may consist of an overpak drum, a containment pallet, and/or a manufacturer's built-in confinement system.

10. Comments - Any notes or comments may be written in this area for reference. Use this space to explain any problems and corrective action to be taken.

**B. Main Hazardous Waste Storage Building**

The Fire Safety Officer inspecting the storage facilities will document the inspection and specify all deficiencies on the Hazardous Waste Storage Facility Inspection Form (Appendix B). The inspector will indicate by checkmark all items that comply. The inspector will mark with an "X" all items that are deficient and explain deficiencies in the "Comments" section.

1. Inspection Date - Date of inspection.
2. Inspection Performed by - Initials of the Safety Officer completing the inspection.
3. Facility Free of Spills and Leaks - The facility outside and inside should not have any leaks or spills. If any leaks or spills are noted, the inspector will notify the appropriate personnel immediately.
4. Waste Containers Properly Labeled - All waste containers must have LEGIBLE identifying stickers or placards.
5. Waste Container Tops Spill Free, Dry - Top of lid of container or drum should be free of any liquid, residue, or associated material. The lids should be secure whenever possible. Funnel, if applicable, should be removed when not in use and being replaced.
6. Compatible Waste Stored Properly - Waste products in or around an area should be in appropriate containment.
7. Adequate Aisle Space between containers - Containers must be stored in a manner that allows a clear passage for immediate egress and drums turned so that labels are visible.
8. Waste Container Openings Secured, Tight - All lids will be secured when not in use. Only the correct lid will be used on container. (Rags, cork, or other material is not acceptable at any time).
9. Waste Containers within Secondary Containment - All drums or containers will be kept

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within a secondary containment. A secondary containment may consist of an overpak drum, a containment pallet, and/or a manufacturer's built-in confinement system.

10. Comments - Any notes or comments may be written in this area for reference. Use this space to explain any problems and corrective action to be taken.

### 36.4.5 Training

Employees who work with or around hazardous waste will be trained on an annual basis and such training shall be documented. The training will include the following:

- A. definition of hazardous waste
- B. explanation of generator status
- C. requirements of storage areas, both main and satellite
- D. dispensing of waste/material handling
- E. inspections -- what, how, and when
- F. what to do in case of spills and/or leaks
- G. record keeping
- H. labeling

### 36.4.6 Disposal

All hazardous waste at Six Flags New England will be disposed of through a licensed hazardous waste disposal facility. Six Flags New England is presently handling, transporting, and disposing all of Six Flags New England hazardous and non-hazardous waste.

All hazardous waste disposal must be arranged through the Six Flags New England. When a drum in a satellite storage area is nearing the full point (i.e., the drum will be full within the next week), the responsible supervisor will call the Waste company to arrange a pick up. **DO NOT WAIT UNTIL THE DRUM IS FULL TO NOTIFY THE SUPERVISOR.**

All hazardous waste in the main Hazardous Waste Storage Building will be monitored by the Safety Department. Any waste that needs to be moved from a satellite storage area to the main Hazardous Waste Storage Building will be done under the direction of the Six Flags New England. **UNDER NO CIRCUMSTANCES WILL HAZARDOUS WASTE BE MOVED WITHOUT THE CONSENT OF SIX FLAGS NEW ENGLAND.**

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#### **36.4.7 Recordkeeping**

A. Notification of Regulated Waste Activity

This form is used to notify the Six Flags New England of the waste generated at Six Flags New England. The forms will be reviewed annually in March to assure that the records of Six Flags New England have correct and up-to-date information. These forms will be maintained on file at Six Flags New England for three years.

B. Manifests

A Uniform Hazardous Waste Manifest form (Appendix C) must be completed on all hazardous waste that leaves Six Flags New England property. These forms will be signed only by a designee of the Safety Manager or the Maintenance Manager. Manifest forms will be maintained in a binder and matched with the signed copy that is returned to Six Flags New England from the disposal facility.

If a signed Manifest is not returned to Six Flags New England within 30 days of pick up, an Exception Report must be filed with the disposal company. If a copy of the Manifest is still not returned within 45 days, an Exception Report will be filed with the Environmental Protection Agency, Region 3.

C. Annual Waste Summary Report

This report indicates what wastes have been generated, the quantity, and method of disposal. Also noted is the recycling and reduction program that has been implemented over that year.

#### **36.5 HANDLING AND STORAGE OF HAZARDOUS AND NON-HAZARDOUS WASTE**

A. All waste storage containers must be labeled by waste characteristic (hazardous or non-hazardous), type (e.g. waste oil) and accumulation start date. The container must remain sealed.

B. Facility generating waste will deposit waste in appropriate 55 gallon drum. Individual depositing waste is required to log the following; date, type of waste, amount of waste, and individuals name.

C. Once a 55 gallon drum is filled to 80% of capacity it is considered full. The Individual filling the drum when it reaches 80% of capacity must log the date full and immediately notify the Safety Department of full drum.

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- D. Facility generating waste must move the drum to the main storage facility within three days of date full.
- E. The shop transporting waste drums to the main waste storage facility is required to notify the Safety Department in order to gain access to facility.
- F. Under no circumstances will waste drums be dropped off outside the main waste storage facility.
- G. Safety Representative will meet Maintenance person at main waste storage facility, log the waste received and perform the following checks: proper labeling, accumulation date, contents, tight seal, vent bung (if required) and shop generator.
- H. Under guidance of Safety Representative, Maintenance personnel will place full drum in main waste storage facility. Non-Hazardous Waste will be segregated room Hazardous waste.
- I. The Safety Department will conduct weekly inspections of all shops, satellite accumulation areas and main waste storage facility for leaks, spills and drum deterioration. Drum capacities and quantities will also be monitored.

## **36.6 WASTE ACCEPTED BY STERICYCLE**

### **36.6.1 Acceptable Wastes - Medical**

Stericycle accepts those wastes that are generated in the diagnosis, treatment, or immunization of humans or animals or related research, in the production/testing of biologicals (vaccines), and in the preparation and administration of chemotherapy agents. Stericycle acceptance practices are subject to those defined by federal, state and local laws as medical biohazardous, biomedical, infectious waste.

### **36.6.2 Medical Waste Including Pathological Waste**

- A. Laboratory waste including, but not limited to:
  - Cultures – medical/pathological
  - Cultures/stocks of infectious agents - research and industrial
  - Vaccines and related waste generated in the production thereof
  - Microbiologic specimens and related waste
- B. Surgical specimen/tissues, contaminated animal parts, tissues, carcasses, or body fluids pathological waste exclusive of preservative agents.



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- C. Fluid blood/blood products, containers/equipment and articles contaminated with blood/blood products
- D. Medical waste contaminated with excretion, exudates, secretions, body fluids including, but not limited to, isolation waste

#### **36.6.3 Sharps Waste Including But Not Limited To:**

- A. Needles, syringes, blades, needles with attached tubing, contaminated disposable surgical instruments
- B. Medical/laboratory glassware including slides, pipettes, blood tubes, blood vials, contaminated broken glass

#### **36.6.4 Other medical waste as defined by the infection control staff, physician, veterinarian or local health officer to be isolated and handled as medical waste**

#### **36.6.5 Chemotherapy (Antineoplastic/Cytotoxic Drugs)**

- A. Gowns, gloves, masks, barriers, IV tubing, empty bags/bottles, needles and syringes, empty drug vials, spill kits and other items generated in the preparation and administration of antineoplastic drugs. Where prior authorization has been received from Stericycle , bulk chemotherapy waste may be accepted for destruction provided such waste does not constitute a hazardous waste. A list of all chemotherapeutic agents and their mixtures with national drug codes number (NDC), manufacturer name and trade or brand is necessary. (Reference: Pharmaceutical Waste Characterization Data Request - WCDR)

#### **36.6.6 International Waste**

Waste material from international ocean liners, ships and planes which is not otherwise characterized as hazardous waste. Such wastes streams are regulated by the United States Department of Agriculture.

#### **36.6.7 Medical Records/Confidential Documents**

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### **36.6.8 Non-hazardous Pharmaceutical Waste Including Controlled Substances, Prescription Drug and Over-the-counter (OTC) Medications (Reference Pharmaceutical WCDR)**

- A. Where prior authorization has been received from Baystate Medical Center, pharmaceutical waste may be accepted for destruction at a Baystate Medical facility permitted for disposal of pharmaceuticals. A list of the drugs with national drug code (NDC) number, manufactures name, and trade or brand name is necessary.

## **36.7 WASTE NOT ACCEPTED**

### **36.7.1 Radioactive Waste**

UNDER NO CIRCUMSTANCES will any regulated level of radioactive waste. Prior to treatment all containers will be inspected by means of a radiation monitor. Any container reflecting a level above regulatory limits will be rejected for treatment.

### **36.7.2 Hazardous Waste Including, But Not Limited To:**

- Solvents, Paint, paint thinner
- Drums or other containers with hazard warning sign
- Batteries
- Glass thermometers and blood pressure manometers containing mercury
- Chemicals including but not limited to formaldehyde (AKA formalin) acids, alcohols, and waste oil
- In order to comply with State and Federal regulations, all hazardous waste must be managed by a licensed hazard waste contractor. Baystate/Stericycle does not provide service for hazardous waste including preservative agents, solvents, and other chemical waste. It is recommended that each facility contact its State or local regulatory agent for hazardous waste compliance regulations.

### **36.7.3 Human Remains**

Stericycle policy is that human remains, i.e. cadavers, be segregated from the medical waste. Stericycle will not accept these materials.

### **36.7.4 Compressed Gas Cylinders/Canisters, and Aerosol Cans**

### **36.7.5 Improperly Packaged, Leaking, or Damaged Containers**

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## **36.8 SEGREGATION AND PACKAGING OF ACCEPTABLE WASTE**

### **36.8.1 Medical Waste (biomedical, infectious)**

Waste materials should be segregated at the point of origin and placed in at least one red bag which has been marked/labeled according to federal, state and local regulations (i.e. red in color or marked with the biohazard symbol and the word “biohazard”) which is impervious to moisture and of sufficient strength to preclude ripping, tearing, or bursting under normal waste handling conditions. Bags must be tied, or otherwise secured, to prevent leakage or expulsion of contents.

The containment of waste in “autoclavable” bags is acceptable, but not required, for Stericycle steam autoclave processing.

### **36.8.2 Sharps, Waste Needles, Blades, Syringes, Broken Medical Glassware**

These wastes should be segregated at the point of use, and must be placed in rigid, puncture-resistant containers which when sealed are leak resistant and cannot be easily opened. These containers must be marked/labeled in accordance with applicable federal, state, or local regulations.

Care should be taken not to overfill sharps containers in order to avoid associated hazards.

### **36.8.3 Body Fluids, Suctioned Fluids, and Other Non-Chemical Fluids**

Any volume of fluids which are not absorbed within other waste materials such as sponges or dressings, must be placed within leak-resistant break/resistant containers that are tightly lidded or stoppered to prevent leakage.

### **36.8.4 Containment of Bio-hazardous and Sharps Waste Prior to Stericycle Collection**

Medical waste contained as described in 3.1-3.3 must be placed by the customer facility into Stericycle cardboard cartons, plastic tubs or fiberboard drums for transport off-site, depending upon the types of waste and specific requirements of the Stericycle district providing service. At a minimum, all medical waste should be placed into a disposable carton/drum or reusable plastic tub. Sharps containers may be placed into tubs or boxes along with bagged waste, but need not be red-bagged unless leakage is possible.

### **36.8.5 Segregation and Containment for Specific Treatment Requirements**

Chemotherapy waste, pathological waste (defined as: human organs, body parts and surgical specimens), contaminated animals parts/tissues, and carcasses require incineration. Other bio-

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hazardous waste/sharp waste are amenable to either steam autoclave processing or incineration.

Packages containing pathological or chemotherapy waste must be labeled as to their contents in order to assure appropriate treatment methods.

In order to insure safe handling, provision of proper treatment/incineration and that appropriate clean up techniques are followed in the event of a spill, Stericycle requires that all chemotherapy waste be segregated from medical waste and labeled as such. In the event that chemotherapy waste is mixed with other medical wastes, then the entire contents of that container must be labeled as chemotherapy waste. All chemotherapy waste will be incinerated.

Since pathological waste will be incinerated, Stericycle requires all customers to identify these containers. In addition, pathological waste must be segregated from any preservatives, liquids prior to being packaged for Stericycle collection.

### **36.8.6 International Waste**

Shipyards and airline waste should be secured in cash bags and placed into strong cardboard boxes or Stericycle plastic tubs prior to transport as directed by local port authority compliance. Leaking or damaged containers will not be accepted. All containers must be labeled "foreign garbage."

### **36.8.7 Medical Records**

Medical Records should be contained in sturdy, well secured/taped cardboard boxes or reusable container prior to collection. Containers are available from Stericycle.

### **36.8.8 Pharmaceutical Waste**

All prescription, non prescription and over-the-counter preparations must be managed in accordance with the BH Pharmaceutical Waste Acceptance Protocol.

## **36.9 LABELING AND MARKING OF MEDICAL WASTE BAGS AND CONTAINERS**

### **36.9.1 Biohazard Bags**

At a minimum, bags must be red in color or another color labeled with the international biohazard

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symbol and the word "*BIOHAZARD*."

### **36.9.2 Sharps Containers**

At a minimum, bags must be red in color or any other color labeled with the international biohazard and the word "*BIOHAZARD*"

### **36.9.3 Secondary Container- Provided by BFI-MWS**

Whether containers are disposable cartons/fire drums/sharps containers or reusable plastic tubs, the customer shall designate the type of waste that is placed in the containers and shall label the container as required by state and local regulations.

## **36.10 DISPOSABLE vs. REUSABLE WASTE CONTAINERS- DECONTAMINATION**

### **36.10.1 Disposable Boxes/Fibre Drums**

These containers are incinerated or autoclaved along with wastes contained within  
The treatment process is dictated by the type of waste (pathology/chemotherapy vs. medical/sharps wastes).

### **36.10.2 Disposable Sharps Containers**

All containers are subjected to the same treatment process as the sharps wastes within the container.

### **36.10.3 Reusable Plastic Tub and Lids**

Used containers and lids are decontaminated by exposure to a tub wash process utilizing cleaning agents/hot water at the Stericycle facility prior to delivery to customer facilities.

## **36.11 STORAGE OF MEDICAL WASTE**

### **36.11.1 Dedicated Storage Enclosure - Customer Site**

Medical waste to be collected by Six Flags New England should be maintained in an enclosure or designated accumulation area which is secured to deny access to unauthorized persons, marked with warning signs, and provides protection from animals, rodents, insects and natural elements.

Medical waste stored on-site should be stored no more than that time allowed by state regulation.

## **36.12 TRACKING DOCUMENTS FOR MEDICAL WASTE**

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### **36.12.1 Stericycle (Disposal Company)**

All waste transported from the generating facility/person for treatment must be accompanied by a tracking document.

Tracking document must include at a minimum the following information:

- Name, address, telephone number of transporter
- Type and quantity of medical waste transported
- Generator name, address and telephone number
- Name, address and telephone number of permitted medical waste treatment facility

A signed copy of the tracking document(s) will be provided to the customer at the time of waste collection.

The tracking document(s) will be in the custody of the Stericycle driver hauling the medical waste to its treatment/destruction at all times.

Documentation will be mailed to the customer by Stericycle on a monthly basis or more frequently as required by state regulation detailing receipt of treatment/destruction of medical waste collected.

Six Flags New England will maintain signed copies of all tracking documents for a minimum of three years.

## **36.13 TRANSPORTATION OF MEDICAL WASTE**

### **36.13.1 Permitted Vehicles**

Stericycle operates permitted vehicles for medical waste transport to a permitted treatment facility or transfer station as required by state law.

### **36.13.2 Drivers Responsibility/Authority**

Stericycle drivers may reject any containers which do not meet acceptable waste specifications.

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Improper labels, leakage, bulging, damaged containers, and improper packaging is some of the causes for rejection of medical waste containers.

Containers may be subject to an off-specification charge for repackaging and special handling, if such is required.

### **36.13.3 Emergency Spill Response**

Stericycle vehicles are equipped with emergency spill kits, and drivers are trained in emergency spill response procedure.

All transportation practices and policies for medical waste provided by Stericycle must comply with federal, state and local laws.

## **36.14 TREATMENT OF WASTE**

### **36.14.1 Treatment Facilities**

All waste collected by Six Flags New England will be transported to a Stericycle owned/operated facility or Stericycle contracted facility for treatment/disposal.

Treatment facilities operate in compliance with applicable federal, state and local laws/regulations and hold all required permits and licenses.

### **36.14.2 Treatment Methods/Parameters**

Pathological waste (human and contaminated animal body parts, organs, and surgical specimens) will be incinerated.

Chemotherapy waste will be incinerated.

Bio-hazardous waste and sharps waste will be subjected to the steam autoclave process or incineration.

International waste will be subjected either to the steam autoclave process or incineration as defined by the compliance agreement with the local port authority or U. S. D. A.

Labeled medical records will be destroyed by either shredding or incineration.

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Pharmaceuticals will be incinerated at a facility permitted for pharmaceutical disposal.

## **36.15 MEDICAL WASTE DISPOSAL LAWS, REGULATIONS AND POLICIES**

### **36.15.1 Occupational Standards for Management of “Blood and Potentially Infectious Materials”- OSHA**

“Potentially infectious materials” include human blood/blood components and products, as well as semen, vaginal secretions, cerebrospinal, pleural, pericardial, peritoneal and amniotic fluids, saliva in dental procedures, body fluids visibly contaminated with blood, any un-preserved tissue and all body fluids in situations when it is impossible to differentiate between fluids.



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**APPENDIX A  
HAZARDOUS WASTE**

FEDERAL LAW PROHIBITS IMPROPER DISPOSAL.  
IF FOUND, CONTACT THE NEAREST POLICE, OR PUBLIC SAFETY  
AUTHORITY, OR THE U.S. ENVIRONMENTAL PROTECTION AGENCY  
IN EVENT OF EMERGENCY CALL SAFETY-KLEEN CORP  
TELEPHONE:1-708-888-4660 (24 hours)

GENERATOR INFORMATION:

ACCOUNT NO.:\_\_\_\_\_

NAME:\_\_\_\_\_

ADDRESS:\_\_\_\_\_

CITY/STATE:\_\_\_\_\_

USA EPA ID NO.:\_\_\_\_\_ STATE EPA ID NO.:\_\_\_\_\_

ACCUMULATION START DATE:\_\_\_\_\_ MANIFEST DOCUMENT NO.:\_\_\_\_\_

GENERATOR STORAGE DATE:\_\_\_\_\_ TRANSFER START DATE\_\_\_\_\_ TSDF STORAGE DATE\_\_\_\_\_

CONTAINER NO.:\_\_\_\_\_ USE LABEL BY:\_\_\_\_\_

**CONTROL#086430-6**

(SERVICE DOCUMENT)

(PALLET)

CONT#

SK DOT#                      DOC#

MANF#

GEN#



YOUR PARK NAME	
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EFFECTIVE: January 2014	SUPERSEDES: January 2013

## **APPENDIX C**

**INSERT COPY OF FEDERAL REGULATIONS  
UNIFOM HAZARDOUS WASTE MANIFEST**

YOUR PARK NAME	
SUBJECT: WASTE MANAGEMENT PROCEDURES	SAFETY & HEALTH COMPLIANCE MANUAL
SECTION: 36	PAGE 20 of 20
EFFECTIVE: January 2014	SUPERSEDES: January 2013

## 6.0 MEDICAL WASTE

### WASTE ACCEPTANCE PROTOCOL

- 1.0 Waste Accepted by Stericycle
- 2.0 Non-conforming Waste not Accepted by Stericycle
- 3.0 Segregation and Packaging of Medical Waste
- 4.0 Labeling and Marking of Medical Waste Containers
- 5.0 Disposable vs. Reusable Containers - Decontamination
- 6.0 Storage of Medical Waste
- 7.0 Tracking Documents for Medical Waste
- 8.0 Transportation of Medical Waste
- 9.0 Treatment of Medical Waste
- 10.0 Laws, Regulations and Policies for Medical Waste Disposal

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Received and Accepted By:\_\_\_\_\_ Date\_\_\_\_\_

Signature:\_\_\_\_\_

Title:\_\_\_\_\_

Customer Facility/Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_